Application or Docket Number

10/030387

		CLAIMS A	S FILED	- PART	1					-			4
4		(Column 1) (Column 2)			mn 2)		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
	OTAL CLAIMS						RATE	FEE	7	RATE	FEE	┨	
-	OR .	NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E	OR	2122		1	
L	OTAL CHARGE	ABLE CLAIMS	14 ·m	• -	<u> </u>	$I \mid$	X\$ 9=		OR	X\$18=		1	
#—	DEPENDENT C		2 minus 3 = * €			}		X42=	-	OR			┨
L	ULTIPLE DEPE	NDENT CLÁIM F	RESENT				+140=	 	1			1	
1.	f the difference	e in column 1 is	less than zero, enter "0" in column 2				TOTAL	 	OR	+280=	(A) Y	1	
	419 19	LAIMS AS	AMENDE	ED - PART II				IOIAL	L	OR	TOTAL	AIDI	4
	1 1 1 - 0 4	(Column 1)	(Column 2) (Column 3)			<u>)</u> .	SMALL ENTITY				HER THAN LL ENTITY		
ENTA	V	REMAINING AFTER AMENDMENT		NUMI PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	1
AMENDMENT	Total	• 14	Minus	* 14	, or	:A-	1	X\$ 9=	FEE		X\$18=	FEE	1
AME	Independent	. 2	Minus	***		-0	<u> </u>	X42=	 	OR	X84=		1
1	FIRST PRESE	ILTIPLE DEPENDENT		CLAIM	CLAIM				OR			1	
Ş			•				+140=.		OR	+280=	ئے		
B							A	DDIT. FEE		OR	TOTAL ADDIT. FEE		1
1	(Column 1) (Column 2) (Column 3)									•	•	•	1
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	1
Š	Total	•	Minus	**		=	11	X\$ 9=	FEE	OR	X\$18=	FEE	I
A	Independent	*	Minus	***		8]	X42=			X84=		ł
<u> </u>	I WOT PRESE	LTIPLE DEPENDENT CLAIM				╛┠			OR	••••	Marie de Ca	ŀ	
								+140=	•	OŘ	+280=	•	
							A	TOTAL DDIT. FEE		OR	TOTAL ODIT, FEE		ı
(Column 1) (Column 2) (Column 3)													١
O L		CLAIMS REMAINING AFTER		HIGHE	EST	PRESENT	Ιг		ADDI-	·ſ		ADDI-	l
AMENDMENT	Total	AMENDMENT		PAID F		EXTRA	1L	RATE	TIONAL FEE	ľ	RATE	TIONAL	ĺ
RENC	Independent		Minus	**				X\$ 9=	-	OR	X\$18=		-
Ą		NTATION OF ML	•	PENDENT		-	łГ	X42=		OR	X84=	:	
								+140=		ľ	+280=		l
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR L	TOTAL		
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE DOR ADDIT. FEE OR ADDIT. FE													
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